

UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF GEORGIA  
ATLANTA DIVISION

IN RE:

ANTHONY C. HARRISONCase No.: 17-55705Chapter: 13

Debtor(s) MOTION FOR

CASE RECONSIDERED

To whom it may concern, I, ANTHONY C. HARRISON would like to continue and to please have my case reopened. I was submitting my payments up until ~~Aug~~ August - Sept. I was mentally unstable due to the fact that I lost my brother in June and had to pay towards the funeral. I also around the same time (Oct-Nov) found out my fiance was diagnosed with cancer. Even after all this devastation, I through USAA, USAA whom I bank with, withheld \$100 of the \$400 payment in turn the payment to the trustee was rejected. My lawyer contacted me on December 21, and told me to dismiss that day. I got a money order for \$494<sup>00</sup> and went to the trustee office. I contacted my lawyer prior to entering the building only to find OUT my case WAS dismissed. Please reconsider.

Dated: 12/31/18

Signature:

Anthony C. Harrison  
Please Reconsider

Printed Name:

ANTHONY C. HARRISON

Address:

617 Falcons RidgeMcDonough GA 30253

Phone:

404-438-5960

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RECEIVED  
U.S. BANKRUPTCY COURT  
NORTHERN DISTRICT OF GEORGIA  
ATLANTA DIVISION  
BY ANTHONY C. HARRISON

UNITED STATES BANKRUPTCY COURT

NORTHERN DISTRICT OF GEORGIA

ATLANTA DIVISION

IN RE: ANTHONY C. HARRISON ) Case No: 17-55705  
                                ) Chapter 13  
                                )  
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Debtor(s)

CERTIFICATE OF SERVICE

I, the undersigned, hereby certify under penalty of perjury that I am, and at all times hereinafter mentioned, was more than 18 year of age, and that on the 31 day of December, 2018, I served a copy of MOTION OF CASE RECONSIDERATION which was filed in this bankruptcy matter on the 31 day of December, 2018.

Mode of service (check one):

MAILED

HAND DELIVERED

Name and Address of each party served (If necessary, you may attach a list.):

Melissa J. Davy  
Standing Ch. 13 TRUSTEE  
260 Peachtree Street NW  
Atlanta GA 30303 (suite 200)  
678-510-1444

1<sup>ST</sup> CHOICE CREDIT UNION  
315 AUBURN AVE NE  
ATLANTA GA 30303

I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated:

December 31, 2018

Signature:

Printed Name:

Address:

617 Falcons Ridge  
McDONOUGH GA 30253

Phone:

404-438-5960

(Generic Certificate of Service – Revised 4/13)